PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correcte maintenance fee notificat	form should be used for correspondence including d below or directed oth ions.	or trans ig the F erwise	smitting the ISSU Patent, advance of in Block 1, by (a	JE FEE and PUBLIC rders and notification a) specifying a new co	of ma orresp	ON FEE (if requi aintenance fees wondence address;	red). B ill be a and/or	slocks 1 through 5 sh mailed to the current (b) indicating a sepa	nould be completed where correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 11/02/2007						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
	/Blanche Gu			man-Salmon/		(Signature)				
					De	ecember 20,	<u> 20</u> 07		(Date)	
APPLICATION NO.	PPLICATION NO. FILING DATE		FIRST NAMED INVE			ATTORNEY DOCKET NO.			CONFIRMATION NO.	
09/608,512	06/30/2000			Reynold V. D'Sa			2207/P6786		9566	
TITLE OF INVENTION										
APPLN. TYPE	SMALL ENTITY	ISS	SUE FEE DUE	PUBLICATION FEE D	UE	PREV. PAID ISSUI	E FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO		\$1440	\$0		\$0		\$1440	02/04/2008	
EXAMINER		ART UNIT		CLASS-SUBCLASS	S					
MEONSKE, TONIA L			2181	712-233000						
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED O PLEASE NOTE: Unless an assignee is identified below, no assign recordation as set forth in 37 CFR 3.11. Completion of this form is not considered. 				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type) data will appear on the patent. If an assignee is identified below, the document has been filed for T a substitute for filing an assignment.						
(A) NAME OF ASSIC		nenon (or tills form is 140	(B) RESIDENCE: (C						
Intel Corp	oration			Santa (Cla	ra, CA_				
Please check the appropri	ate assignee category or	categor	ries (will not be pr	rinted on the patent):		Individual 🗹 Co	rporati	on or other private gro	up entity 🔲 Government	
4a. The following fee(s) are submitted: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies				b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number						
	SMALL ENTITY statu	s. See 3	37 CFR 1.27.	☐ b. Applicant is no	longe	er claiming SMAI	LL ENT	ITY status. See 37 CF	FR 1.27(g)(2).	
NOTE: The Issue Fee and interest as shown by the r	d Publication Fee (if requeecords of the United Sta	aired) w tes Pate	rill not be accepted nt and Trademark	d from anyone other the Office.	an the	e applicant; a regi	stered a	ttorney or agent; or th	e assignce or other party in	
Authorized Signature	/Jeffrey R. Jo	osep	oh/			Date Dec	emb	er 20, 2007		
Typed or printed name		Registration No. 54,204								
This collection of informan application. Confident submitting the completed this form and/or suggestion. Boy 1450 Alexandria V	ation is required by 37 C iality is governed by 35 I application form to the ons for reducing this but irginia 22313-1450 DC	FR 1.3 U.S.C. USPTO den, sh	11. The information 122 and 37 CFR O. Time will vary ould be sent to the SEND FEES OR (on is required to obtain 1.14. This collection is depending upon the i e Chief Information O	or re s estin ndivide fficer	tain a benefit by t mated to take 12 to dual case. Any co , U.S. Patent and THIS ADDRESS	he publ ninutes mment Tradem	ic which is to file (and to complete, including son the amount of tingark Office, U.S. Depart of Commissioner for the commissioner for	by the USPTO to process) g gathering, preparing, and ne you require to complete utment of Commerce, P.O. Payerts, P.O. Boy, 1450.	

This collection of information is rean application. Confidentiality is a submitting the completed applications form and/or suggestions for re Box 1450, Alexandria, Virginia 22 Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.